Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
EASTERN DISTRICT OF NEW YORK	
Case number (if known)	Chapter you are filing under:
	■ Chapter 7
	☐ Chapter 11
	☐ Chapter 12
	☐ Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on	Slava		
ŗ	your government-issued picture identification (for example, your driver's	First name	First name	
	license or passport).	Middle name	Middle name	
	Bring your picture	Shapiro		
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	—
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2492		

Case 8-21-70126-reg Doc 1 Filed 01/22/21 Entered 01/22/21 13:04:28 1/22/21 12:58PM Debtor 1 Slava Shapiro Case number (if known) About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and ☐ I have not used any business name or EINs. **Employer Identification** FDBA I used to own the Dental Practice Numbers (EIN) you have ☐ I have not used any business name or EINs. Business Slava Shapiro, D.D.S., M.D., P.C., used in the last 8 years FEIN 26-2645443 Include trade names and Business name(s) Business name(s) doing business as names EINs EINs If Debtor 2 lives at a different address: Where you live 3350 Shore Parkway Brooklyn, NY 11235 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Kings County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one:

this district to file for bankruptcy

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

1/22/21 12:58PM Debtor 1 Slava Shapiro Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When Case number District District When Case number 10. Are any bankruptcy □ No cases pending or being Yes. filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? **Debtor's former** Slava Shapiro, D.D.S., M.D., P.C. Debtor Relationship to you business **US Bankruptcy Court -Eastern District of New York - Central** 7/02/20 8-20-72381-rea District When Case number, if known Debtor Relationship to you When Case number, if known District Do you rent your Go to line 12. ■ No. residence?

Has your landlord obtained an eviction judgment against you?

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

No. Go to line 12.

bankruptcy petition.

Yes.

Deb	tor 1 Slava Shapiro				Case number (if known)	1/22/21 12:58PM		
art	3: Report About Any Bu	sinesses	You Owr	as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of bus	siness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name					
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	Number, Street, City, State & ZIP Code				
	it to this petition.		Chec	k the appropriate bo	x to describe your business:			
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	Э			
If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set a deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the you are a small business debtor operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the you are a small business debtor so that it can set a deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set a deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set a deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set a deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the in 11 U.S.C. 1116(1)(B).			et, statement of					
	For a definition of small	■ No.	I am r	not filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the Code.			ne Bankruptcy		
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Ba	nkruptcy Code.		
art	: 4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?				
	identifiable hazard to public health or safety?							
Or do you own any property that needs immediate attention?				diate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?				
					Number, Street, City, State & Zip Code			

Debtor 1

Slava Shapiro

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit
counseling agency within the 180 days before I filed
this bankruptcy petition, and I received a certificate of
completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Slava Shapiro			Case number	r (if known)			
Par	t 6: Answer These Quest	ions for R	eporting Purposes					
	What kind of debts do you have?	16a.	Are your debts primarily consur individual primarily for a personal,		ned in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			■ Yes. Go to line 17. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
		16b.						
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe th	at are not consumer debts or busines	s debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.	are paid that funds will be available	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		Yes					
18.	How many Creditors do	■ 1-49		□ 1,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000	☐ 50,001-100,000			
		□ 100-1 □ 200-9		☐ 10,001-25,000	☐ More than100,000			
19.	How much do you	= ¢o ¢	250,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?	■ \$0 - \$50,000 □ \$50,001 - \$100,000		□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
	be worth?	□ \$100,001 - \$500,000		□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion			
		□ \$500,	001 - \$1 million	☐ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$	550,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
		□ \$100,001 - \$500,000 ■ \$500,001 - \$1 million		□ \$50,000,001 - \$100 million □ \$100.000.001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		— \$500,	001 - \$1 IIIIII0II					
Par	t 7: Sign Below							
For	you	I have ex	camined this petition, and I declare u	under penalty of perjury that the inforr	nation provided is true and correct.			
				n aware that I may proceed, if eligible, available under each chapter, and I ch	under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7.			
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.							
		bankrupt and 357	ccy case can result in fines up to \$25 1.		or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Slava S	ra Shapiro Shapiro e of Debtor 1	Signature of Debto	r 2			
		Executed		Executed on				
			MM / DD / YYYY	MM	/ DD / YYYY			

Debtor 1 Slava Shapiro		Case	1/22/21 12:58PM e number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unite for which the person is eligible. I also certify t	ed States Code, and have ex hat I have delivered to the d	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter ebtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect. /s/ Sergei Orel Signature of Attorney for Debtor	, certify that I have no knowl	January 22, 2021 MM / DD / YYYY
	Sergei Orel Printed name Sergei Orel LLC		
	Firm name 2125 Center Avenue Suite 310 Fort Lee, NJ 07024 Number, Street, City, State & ZIP Code		
	Contact phone 2014911464 008862001 NJ Bar number & State	Email address	sergeiorel@yahoo.com

Filli	n this inform	ation to identify your	case:				
Deb	tor 1	Slava Shapiro					
Deb	tor 2	First Name	Middle Name	Last Name			
	ise if, filing)	First Name	Middle Name	Last Name			
Unit	ed States Ban	kruptcy Court for the:	EASTERN DISTRICT	OF NEW YORK			
Case (if kno	e number					_	if this is an
				,		amen	ded filing
Ott	isial Ess	4000					
		m 106Sum Vour Assets :	and Liabilities a	nd Cortain Statistical Inf	formation		1045
				Ind Certain Statistical Info			12/15 a correct
infor	mation. Fill o	ut all of your schedule	es first; then complete	the information on this form. If you a ck the box at the top of this page.			
Part	1: Summa	rize Your Assets					
						Your a	ssets of what you own
1.	Schedule A/I 1a. Copy line	3: Property (Official Fo 55, Total real estate, fr	orm 106A/B) com Schedule A/B			\$	0.00
	1b. Copy line	62, Total personal prop	perty, from Schedule A/B	3		\$	22,700.00
	1c. Copy line	63, Total of all property	on Schedule A/B			\$	22,700.00
Part	2: Summa	rize Your Liabilities					
							abilities t you owe
2.			aims Secured by Propen nn A, Amount of claim, a	ty (Official Form 106D) tt the bottom of the last page of Part 1 o	of Schedule D	\$	0.00
3.			Unsecured Claims (Offici 1 (priority unsecured clai	ial Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>		\$	0.00
	3b. Copy the	total claims from Part 2	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F		\$	851,610.00
				You	r total liabilities	\$	851,610.00
							001,010.00
Part	3: Summa	rize Your Income and	Expenses				
4.		our Income (Official Fo		le I		\$	12,573.84
5.		our Expenses (Official onthly expenses from line	,			\$	18,578.00
Part	4: Answer	These Questions for	Administrative and Sta	tistical Records			
6.	-		er Chapters 7, 11, or 13 on this part of the form.	? Check this box and submit this form to	the court with you	ur other sch	nedules.
	■ Yes						
7.	What kind of	debt do you have?					
				r debts are those "incurred by an individege of the statistical purposes. 28 U.S.C. §		a personal,	family, or
		bts are not primarily of twith your other sched		ave nothing to report on this part of the	form. Check this	box and s	ubmit this form to
Offic	cial Form 106S	•		oilities and Certain Statistical Inform	ation	ı	page 1 of 2

Debtor 1 Slava Shapiro Ca

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,985.40

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	223,486.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	223,486.00

					1/22/21 12:58PN
Fill in this info	rmation to identify your	case and this filing:			
Debtor 1	Slava Shapiro				
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK		
Case number					☐ Check if this is an amended filing
					amended ming
Official Fo	orm 106A/B				
Schedu	le A/B: Prop	ertv			12/15
			ice. If an asset fits in more than o		
information. If mo	ore space is needed, attach		. On the top of any additional page		
Answer every que	estion.				
Part 1: Describ	e Each Residence, Building	g, Land, or Other Real Estate	You Own or Have an Interest In		
1. Do vou our o	- have any large as assistable	a interest in any residence. h	uilding, land, or similar property?		
1. Do you own or	r nave any legal or equitable	e interest in any residence, b	unding, iand, or similar property?		
No. Go to Pa	art 2.				
☐ Yes. Where	e is the property?				
Part 2: Describ	e Your Vehicles				
□ No ■ Yes	nuoks, nuotors, sport u	tility vehicles, motorcycle	•		
. 55					
3.1 Make:	Mercedes Benz	Who has an intere	st in the property? Check one		laims or exemptions. Put
Model:		■ Debtor 1 only			ed claims on Schedule D: ims Secured by Property.
Year:	1998	Debtor 2 only		Current value of the	Current value of the
Approxim	ate mileage:	□ Debtor 1 and De	ebtor 2 only	entire property?	portion you own?
Other info	ormation:	☐ At least one of t	he debtors and another		
				¢2 000 00	#0.000.00
			community property	\$3,000.00	\$3,000.00
		(see instructions)			
Examples: Bo No Yes Add the dol pages you h	pats, trailers, motors, personals, trailers, trailers, motors, personals, trailers, motors, personals, trailers, motors, personals, trailers, trailers, motors, personals, trailers, t	onal watercraft, fishing vess you own for all of your en . Write that number here	al vehicles, other vehicles, an sels, snowmobiles, motorcycle a tries from Part 2, including ar	occessories	\$3,000.00
		able interest in any of the	ronowing items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	goods and furnishings Najor appliances, furniture	e, linens, china, kitchenware			

Official Form 106A/B Schedule A/B: Property

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

1/22/21 12:58PM Debtor 1 Slava Shapiro Case number (if known) 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Checking Citibank Bank Account Number xxxx6512 \$1.600.00 Service Credit Union Bank Account Number xxxx3155 \$13.900.00 17 2 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No

Official Form 106A/B Schedule A/B: Property page 3

Case 8-21-70126-reg

Doc 1

Filed 01/22/21 Entered 01/22/21 13:04:28

					1/22/21 12:58
Debtor 1	Slava Shapiro			Case number (if known)	
☐ Yes.	Give specific informa	tion about them			
Exam ■ No		other general intangibles exclusive licenses, cooperative as tion about them	ssociation holdings, liquor licen	nses, professional licenses	
Money or	property owed to yo	u?			Current value of the
,	,,,,,.				portion you own? Do not deduct secured claims or exemptions.
■ No	funds owed to you				
☐ Yes.	Give specific information	iion about them, including whether	you already filed the returns a	ind the tax years	
■ No		sum alimony, spousal support, ch	nild support, maintenance, divo	orce settlement, property se	ettlement
	·				
		wes you isability insurance payments, disal loans you made to someone else	bility benefits, sick pay, vacatio	on pay, workers' compensa	ation, Social Security
	Give specific informa	tion			
Exam ■ No		, or life insurance; health savings a		ner's, or renter's insurance	•
⊔ Yes.	Name the insurance of	company of each policy and list its Company name:	value. Beneficia	ary:	Surrender or refund value:
If you some		at is due you from someone who a living trust, expect proceeds from tion		currently entitled to receive	e property because
	Cive opcome imening				
		s, whether or not you have filed syment disputes, insurance claims		for payment	
☐ Yes.	Describe each claim.				
34. Other No	contingent and unliq	uidated claims of every nature,	including counterclaims of t	he debtor and rights to se	et off claims
☐ Yes.	Describe each claim.				
■ No	Cive appoific informa	·			
□ res.	Give specific informa	uion		_	
		l of your entries from Part 4, incl ber here			\$15,500.00
Part 5: De	escribe Any Business-R	elated Property You Own or Have an	Interest In. List any real estate i	in Part 1.	
No. G	o to Part 6.	or equitable interest in any business	related property?		
☐ Yes.	Go to line 38.				
Official For	m 106Δ/R	Schadi	Ile Δ/R· Property		nane

Debto	or 1 Slava Shapiro		Case number (if known)	
Part 6	Describe Any Farm- and Commercial Fishing-Related Property Yol If you own or have an interest in farmland, list it in Part 1.	ou Own or Have an Intere	st In.	
46. D	o you own or have any legal or equitable interest in any farm	n- or commercial fishir	ng-related property?	
ı	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That You	ou Did Not List Above		
	o you have other property of any kind you did not already lise Examples: Season tickets, country club membership No Yes. Give specific information			40.00
Part 8	Add the dollar value of all of your entries from Part 7. Write to List the Totals of Each Part of this Form	nat number nere		\$0.00
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$3,000.00		
57.	Part 3: Total personal and household items, line 15	\$4,200.00		
58.	Part 4: Total financial assets, line 36	\$15,500.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$22,700.00	Copy personal property total	\$22,700.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$22,700.00

Official Form 106A/B Schedule A/B: Property page 5

						1/22/21 12:58PF	
FI	ll in this inforr	nation to identify your	case:				
De	ebtor 1	Slava Shapiro					
Do	ebtor 2	First Name	Middle Name	L	ast Name		
	ouse if, filing)	First Name	Middle Name	L	ast Name		
Ur	nited States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF NE	EW Y	ORK		
Ca	ase number						
(if k	known)					☐ Check if this is an	
						amended filing	
		<u>rm 106C</u>					
S	chedul	e C: The Pro	operty You Cla	im	as Exempt	4/19	
the need cas For spe any fun exe	property you li eded, fill out an se number (if kr r each item of ecific dollar ar y applicable st ds—may be u emption to a p	sted on Schedule A/B: F d attach to this page as r nown). property you claim as a nount as exempt. Alteriatutory limit. Some exemptimited in dollar amount articular dollar amount articular dollar amount	property (Official Form 106A/B) many copies of Part 2: Addition exempt, you must specify the natively, you may claim the femptions—such as those for int. However, if you claim an	as yo nal Pa e amo ull fa heal exen	our source, list the property that you age as necessary. On the top of any ount of the exemption you claim. It market value of the property be the aids, rights to receive certain be notion of 100% of fair market value.	additional pages, write your name and One way of doing so is to state a ing exempted up to the amount of penefits, and tax-exempt retirement	
		statutory amount. by the Property You Cla	im as Exempt				
1.	Which set of	exemptions are you cl	aiming? Check one only, ever	n if yo	our spouse is filing with you.		
	☐ You are cl	aiming state and federal	nonbankruptcy exemptions. 1	I1 U.S	S.C. § 522(b)(3)		
	You are cl	aiming federal exemptior	ns. 11 U.S.C. § 522(b)(2)				
2.	For any prop	erty you list on Schedu	ule A/B that you claim as exe	mpt,	fill in the information below.		
		on of the property and line	Specific laws that allow exemption				
	Schedule A/B	that lists this property	portion you own Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	1998 Merce		\$3,000.00		\$3,000.00	11 U.S.C. § 522(d)(2)	
	Line from Sci	nedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
	Furniture a	nd TV hedule A/B: 6.1	\$2,500.00		\$2,500.00	11 U.S.C. § 522(d)(3)	
					100% of fair market value, up to any applicable statutory limit		
	Textbooks Line from Sci	nedule A/B: 6.2	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)	
					100% of fair market value, up to any applicable statutory limit		
	Wedding ri	•	\$1,500.00		\$1,700.00	11 U.S.C. § 522(d)(4)	
	Line from Sci	nedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit		
	Checking: Number xx	Citibank Bank Accou	ınt \$1,600.00		\$1,600.00	11 U.S.C. § 522(d)(11)(C)	
	ITUIIIDEI XX	AAUU I &					

☐ 100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B: 17.1

Deb	tor 1	Sla	va Shapiro		Case number (if known)				
	Brief description of the property and line on Schedule A/B that lists this property			Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption			
				Copy the value from Schedule A/B	Che				
		ervice Credit Union Bank Account		\$13,900.00		\$13,900.00	11 U.S.C. § 522(d)(5)		
		ne from Schedule A/B: 17.2		100% of fair market value, up to any applicable statutory limit		· •			
	(Sub		laiming a homestead exemption of adjustment on 4/01/22 and every 3			led on or after the date of adjustmen	nt.)		
		Yes.	Did you acquire the property covere	d by the exemption wit	thin 1	215 days before you filed this case	?		
			No						
			Yes						

1/22/21 12:58PM

Fill in this inform					
Debtor 1	Slava Shapiro				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT C	OF NEW YORK		
Case number					☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

							1/22/21 12:58PN
Fill in this infor	mation to identify your	case:					
Debtor 1	Slava Shapiro						
	First Name	Middle Name	•	Last Name			
Debtor 2	First Name	Middle Neme		Last Name			
(Spouse if, filing)	First Name	Middle Name	•	Last Name			
United States Ba	ankruptcy Court for the:	EASTERN DIS	TRICT OF NEV	V YORK			
Case number							
(if known)						_ c	heck if this is an
						aı	mended filing
Official Forr	m 106F/F						
	E/F: Creditors W	ho Have II	neacurad	Claims			12/15
	d accurate as possible. Us				t 2 for craditors with I	NONDDIODITY clair	
Schedule D: Credi left. Attach the Co name and case nu	utory Contracts and Unexp tors Who Have Claims Sec ntinuation Page to this pag mber (if known).	ured by Property. je. If you have no i	If more space is nformation to re	needed, copy the	Part you need, fill it o	out, number the ent	ries in the boxes on the
	ors have priority unsecure						
No. Go to F		a olalilis agailist y	ou.				
☐ Yes.	rait 2.						
	All of Your NONPRIORIT	Y Unsecured Cl	aims				
	ors have nonpriority unsec						
	ave nothing to report in this p	•	•	your other schedul	lee		
	ave nothing to report in this p	art. Odbinit tins for	ir to the court with	your other schedul	ies.		
Yes.							
unsecured cla	r nonpriority unsecured claim, list the creditor separately tor holds a particular claim, li	y for each claim. Fo	r each claim listed	d, identify what type	of claim it is. Do not lis	st claims already inc	luded in Part 1. If more
							Total claim
4.1 BHG-B	ankers Healthcare G	p La	st 4 digits of acc	ount number			\$200.000.00
Nonpriorit	ty Creditor's Name						, , , , , , , , , , , , , , , , , , ,
	lar Street ise, NY 13204	W	hen was the debi	incurred?			
	Street City State Zip Code	As	of the date you	file, the claim is: (Check all that apply		
Who incu	urred the debt? Check one.				,		
■ Debto	r 1 only		Contingent				
☐ Debto	r 2 only		Unliquidated				
	r 1 and Debtor 2 only		Disputed				
☐ At leas	st one of the debtors and and	other Ty	pe of NONPRIOR	RITY unsecured cl	aim:		
☐ Checl	k if this claim is for a comr	munity \Box	Student loans				
debt					ion agreement or divord	ce that you did not	
	im subject to offset?		oort as priority clai		lone and other size?	dabta	
■ No			·		lans, and other similar	aenis	
☐ Yes			Other. Specify	Business Loa	ın		

Best Case Bankruptcy

Debtor 1	Slava Shapiro	Case number (if known)	
	BMW Financial Services	Last 4 digits of account number	\$1,400.00
;	Nonpriority Creditor's Name 300 Chestnut Ridge Rd Woodcliff Lake, NJ 07677	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
'	Who incurred the debt? Check one.		
I	Debtor 1 only	☐ Contingent	
ı	Debtor 2 only	☐ Unliquidated	
ı	Debtor 1 and Debtor 2 only	☐ Disputed	
ı	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
ı	☐ Check if this claim is for a community	☐ Student loans	
(debt s the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
I	No	\square Debts to pension or profit-sharing plans, and other similar debts	
I	□ Yes	■ Other. Specify Car Lease termination fee	
	Citi Business Credit Line	Last 4 digits of account number	\$37,909.00
I	Nonpriority Creditor's Name P.O. Box 9001037 Louisville, KY 40290	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
1	Who incurred the debt? Check one.		
I	Debtor 1 only	☐ Contingent	
ı	Debtor 2 only	☐ Unliquidated	
_	☐ Debtor 1 and Debtor 2 only	□ Disputed	
_	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
ı	s the claim subject to offset?	report as priority claims	
l	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
I	☐ Yes	Other. Specify Business Line of Credit	
	CityMD Urgent Care	Last 4 digits of account number	\$590.00
•	Nonpriority Creditor's Name 1345 6th Ave	When was the debt incurred?	
	New York, NY 10105 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
_	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Student loans	
	LI Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
ı	s the claim subject to offset?	report as priority claims	
1	No	$\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical visit invoice debt	

Debtor 1	Slava Shapiro	Case number (if known)	
	Internal Revenue Service	Last 4 digits of account number	\$49,000.00
I	Nonpriority Creditor's Name PO Box 7346 Philadelphia, PA 19101	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
'	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
I	Debtor 2 only	☐ Unliquidated	
I	Debtor 1 and Debtor 2 only	☐ Disputed	
I	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
I	No	\square Debts to pension or profit-sharing plans, and other similar debts	
1	Yes	■ Other. Specify 2019 personal income tax debt	
4.6	Irada Shapiro	Last 4 digits of account number	\$31,500.00
	Nonpriority Creditor's Name 118 Greenway Drive South Syosset, NY 11791	When was the debt incurred?	
Ť	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
,	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
1	Debtor 2 only	☐ Unliquidated	
1	Debtor 1 and Debtor 2 only	☐ Disputed	
1	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
ļ	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
I	No	\square Debts to pension or profit-sharing plans, and other similar debts	
1	☐ Yes	■ Other. Specify Child/Spousal Support	
	Irada Shapiro	Last 4 digits of account number	\$6,500.00
	Nonpriority Creditor's Name 118 Greenway Drive South	When was the debt incurred?	
Ī	Syosset, NY 11791 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Полей-	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent	
	_	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	College Tuition Portion for Daughter for the Summer and Fall 2020	

Debto	r 1 Slava Shapiro	Case number (if known)	
4.8	MOHELA/Dept of Education Nonpriority Creditor's Name	Last 4 digits of account number	\$181,684.00
	633 Sprirt Drive Chesterfield, MO 63005	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
		Student Debt	
4.9	Navient Department Educat Nonpriority Creditor's Name	Last 4 digits of account number	\$41,802.00
	PO Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	■ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	☐ Other. Specify	
		Student Debt	
4.1	NYS Medicaid Settlement	Last 4 digits of account number	\$300,000.00
	Nonpriority Creditor's Name Medicaid Fraud Control Un	When was the debt incurred?	
	300 Motor Parkway Hauppauge, NY 11788 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify NYS Medicaid Settlement	

1 Slav					•			
Optim			Last 4 digits of account number				\$325.	
1 Cou	rt Squ	litor's Name lare West City, NY 11101	When was the debt incurred?					
		City State Zip Code	As of the date you file, the claim	is: Check	k all that apply			
Who inc	curred t	he debt? Check one.						
■ Debt	tor 1 only	y	☐ Contingent					
☐ Debt	tor 2 only	y	☐ Unliquidated					
☐ Debt	tor 1 and	Debtor 2 only	☐ Disputed					
☐ At lea	ast one	of the debtors and another	Type of NONPRIORITY unsecure	ed claim:				
☐ Chec	ck if this	s claim is for a community	☐ Student loans					
debt		•	Obligations arising out of a sep	aration ag	greement or dive	orce that you did not		
	laim sul	oject to offset?	report as priority claims					
No			Debts to pension or profit-shari	ing plans,	and other simila	ar debts		
☐ Yes			Other. Specify Cable bill					
Sprint	•		Last 4 digits of account number				\$900.	
Nonprior	rity Cred Sprint	litor's Name Parkway	When was the debt incurred?				Ψ000.	
		ark, KS 66251 City State Zip Code	- As of the data you file the claim	in Charl	le all that apply			
		he debt? Check one.	As of the date you file, the claim	ııs. Unecl	к ан инат арріу			
■ Debt			O Continue					
			☐ Contingent					
☐ Debt			☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans					
		Debtor 2 only						
		of the debtors and another						
☐ Chec	ck if this	s claim is for a community	☐ Obligations arising out of a sep	aration s	aroomont or all	area that you did not		
	laim sul	oject to offset?	report as priority claims	orde that you did not				
■ No			Debts to pension or profit-shari	ng plans,	and other simila	ar debts		
☐ Yes			■ Other Specify Sprint cell	nhone	hill			
— 163			Other. Specify	prioric	D 111			
List	Others	to Be Notified About a Deb	t That You Already Listed					
more that ed for any Add	n one c y debts the Ar unts of	reditor for any of the debts that in Parts 1 or 2, do not fill out or nounts for Each Type of Uns certain types of unsecured clain		litional cr	reditors here. If	you do not have additional	persons to be	
	6a.	Domestic support obligations		6a.	\$	otal Claim		
Γotal	oa.			ou.	Ψ	0.00		
aims art 1	6b.	Taxes and certain other debts	you owe the government	6b.	\$	0.00		
J. 1	6c.		ijury while you were intoxicated	6c.	\$	0.00		
	6d.		cured claims. Write that amount here.	6d.	\$	0.00		
	6e.	Total Priority. Add lines 6a throu	ugh 6d.	6e.	\$	0.00		
	6f.	Student loans		6f.	\$	otal Claim 223,486.00		
Total					*	220,700.00		
aims Part 2	6g.	Obligations arising out of a co	paration agreement or divorce that					
ui t Z	og.	you did not report as priority of	laims	6g.	\$	0.00		
	6h.	Debts to pension or profit-share	ring plans, and other similar debts	6h.	\$	0.00		

Debtor 1 Slava Shapiro Case number (if known)

6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ 851,610.00

1/22/21 12:58PM

Fill in this inform	ation to identify your			
Debtor 1	Slava Shapiro			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	EASTERN DISTRICT C	PF NEW YORK	
Case number				
(if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Aleksandr Berezovskiy 3350 Shore Parkway Brooklyn, NY 11235	Apartment Lease at 3350 Shore Parkway, Brooklyn, NY 11235 expires in May 2022

				1/22/21 12:5
Fill in this	s information to identify your	case:		
Debtor 1	Slava Shapiro First Name	Middle News	Last Name	
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, fil	ing) First Name	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK	
Case num (if known)	nber			☐ Check if this is an amended filing
	al Form 106H dule H: Your Cod	ebtors		12/15
eople are ill it out, a our name	e filing together, both are equ	ally responsible for supp boxes on the left. Attach Answer every question	olying correct informat the Additional Page t	as complete and accurate as possible. If two married tion. If more space is needed, copy the Additional Page to this page. On the top of any Additional Pages, write e as a codebtor.
_		you are ming a joint case, t	do not list citrici spouse	c as a codebiol.
■ No □ Ye				
	thin the last 8 years, have you na, California, Idaho, Louisiana			ry? (Community property states and territories include hington, and Wisconsin.)
_	. Go to line 3. s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?	
in lin Form	e 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	or if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offici 06G). Use Schedule D, Schedule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the debrack all schedules that apply:
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line
	Number Street City	State	ZIP Code	
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line
	Number Street City	State	ZIP Code	_

	in this information to identify your								
Dei	otor 1 Slava Sha	piro			-				
	otor 2				-				
Uni	ted States Bankruptcy Court for t	he: EASTERN DISTRICT	OF NEW YORK		_				
	se number nown)					ck if this is: An amende	. 3	postpetition c	chapter
_	₩'-'- Б 400							llowing date:	•
	fficial Form 106l				N	/IM / DD/ Y	YYY		
	chedule I: Your In								12/15
sup spo atta	plying correct information. If you are separated and you are separated and you a separate sheet to this form Describe Employmen	ou are married and not filing wing spouse is not filing wing on the top of any addition.	ng jointly, and your s th you, do not includ	pouse is le informa	living with ation abou	you, inclu t your spo	ide inform use. If mo	ation about y	our eeded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fili	ing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed			☐ Employed			
		Employment status	☐ Not employed	☐ Not employed			☐ Not employed		
	employers.	Occupation	Army Major - Ora	al Surge	on				
	Include part-time, seasonal, or self-employed work.	Employer's name	Department of D Army	efense -	US				
	Occupation may include studer or homemaker, if it applies.								
		How long employed the	here? 10 mont	ths					
Par	t 2: Give Details About M	lonthly Income							
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to re	port for ar	ny line, write	e \$0 in the	space. Incl	ude your non-	filing
	u or your non-filing spouse have e space, attach a separate sheet		ombine the information	for all em	nployers for	that perso	n on the lin	es below. If yo	ou need
					For Del	btor 1	For Deb non-filin	tor 2 or ng spouse	
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$4	,985.40	\$	N/A	
3.	Estimate and list monthly over	ertime pay.		3. +	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$ 4,9	85.40	\$	N/A	

Deb	tor 1	Slava Shapiro		Cas	e number (if known)			
				Fo	r Debtor 1	For	Debtor 2 or	
					i Debtor i		-filing spouse	
	Сор	y line 4 here	4.	\$_	4,985.40	\$	N/A	
5.	l ist	all payroll deductions:						
0.				Φ	704.40	Ф	N1/A	
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	791.46	\$_	N/A	
	5b.	Mandatory contributions for retirement plans	5b.		0.00	\$_	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$_	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$ _	N/A	
	5e.	Insurance	5e.	\$ \$	35.00	\$_ \$	N/A	
	5f.	Domestic support obligations Union dues	5f.	φ_ \$	0.00	* *	N/A N/A	
	5g. 5h.	Other deductions. Specify: FICA-MEDICARE	5g. 5h		72.29	· · —	N/A N/A	
	on.		_ 511	+ φ_ \$		* \$_	N/A N/A	
		SGLI	_	φ_ \$	25.00	\$ 	N/A N/A	
		SGLI FAM/SPOUSE	_	Ψ_	10.00	Ψ_	IN/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	933.75	\$_	N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	4,051.65	\$	N/A	
8.		all other income regularly received:						
	8a.	Net income from rental property and from operating a business,						
		profession, or farm Attach a statement for each property and business showing gross						
		receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent		_				
		regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	φ_ \$	0.00	- \$ -	N/A	
	8e.	Social Security	8e.	\$ \$	0.00	\$ -	N/A	
	8f.	Other government assistance that you regularly receive	00.	Ψ_	0.00	Ψ_	IN/A	
	OI.	Include cash assistance and the value (if known) of any non-cash assistance						
		that you receive, such as food stamps (benefits under the Supplemental						
		Nutrition Assistance Program) or housing subsidies.						
		Specify: BAS	_ 8f.	\$_	256.68	\$	N/A	
		DALL		Ф	2 720 45	¢	NI/A	
		SAVE PAY - Housing cost allowance	_	\$ \$	2,720.15	\$_ \$	N/A	
		COLA	_	φ_ \$	4,583.33 962.03	» \$	N/A N/A	
	8g.	Pension or retirement income	_ 8g.	φ_	0.00	- \$ \$	N/A	
	8h.	Other monthly income. Specify:	8h	+ \$ ⁻		+ \$-	N/A	
	011.		_ 011.	· —	0.00	· —	IV/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	8,522.19	\$	N/A	
			_			<u> </u>		
10.	Cald	culate monthly income. Add line 7 + line 9.	10. \$	5	12,573.84 + \$		N/A = \$ 12,5	73.84
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	Stat	e all other regular contributions to the expenses that you list in Schedule	J.					
		ude contributions from an unmarried partner, members of your household, your		ndent	s, your roommate	s, and		
		r friends or relatives.						
	Spe	not include any amounts already included in lines 2-10 or amounts that are not a	avallal	oie to	pay expenses lis	tea in S	scneaule J. 11. +\$	0.00
	Spe						πφ	0.00
12.	Add	the amount in the last column of line 10 to the amount in line 11. The resi	ult is t	he co	mbined monthly i	ncome		
_,		e that amount on the Summary of Schedules and Statistical Summary of Certain						72.04
	appl	ies					12. \$ 12,5	73.84
							Combined	
							monthly in	come
13.	Do	ou expect an increase or decrease within the year after you file this form?	?				-	
		No.						
		Yes. Explain:						

	formation to identify your case:				
Debtor 1	Slava Shapiro			k if this is: An amended filing	
Debtor 2 (Spouse, if filing	ing)			A supplement show	ving postpetition chapter the following date:
United States	Bankruptcy Court for the: EASTERN DISTRICT OF NEW Y	ORK	1	MM / DD / YYYY	
Case number (If known)	·				
	Form 106J				40/4
Be as comp	ule J: Your Expenses plete and accurate as possible. If two married people a full find the space is needed, attach another sheet to this known). Answer every question.				
	Describe Your Household a joint case?				
■ No.	Go to line 2. 5. Does Debtor 2 live in a separate household?				
	No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expense</i> .	s for Separate House	hold of Debte	or 2.	
2. Do yo u	u have dependents? □ No				
Do not Debtor	list Debtor 1 and 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	state the dents names.	Isabella Shapii	ro	7	■ No □ Yes
		Alexander Sha	piro	15	■ No □ Yes
		Dasha Litwin		16	■ No □ Yes
		Rebecca Shap	iro	21	■ No □ Yes
		lgor Litwin		24	■ No □ Yes
		Yelena Shapiro	o	49	□ No ■ Yes
expens	ur expenses include ses of people other than elf and your dependents?				
	Estimate Your Ongoing Monthly Expenses				
Estimate you expenses a applicable of	our expenses as of your bankruptcy filing date unless is of a date after the bankruptcy is filed. If this is a sup date.	you are using this fo plemental <i>Schedul</i> e	orm as a sup J, check the	oplement in a Cha e box at the top o	opter 13 case to report f the form and fill in the
	penses paid for with non-cash government assistance f such assistance and have included it on Schedule I:			Your expe	enses
(Official FO	1001.				
	ntal or home ownership expenses for your residence. nts and any rent for the ground or lot.	Include first mortgage	4. \$		2,700.00
If not i	ncluded in line 4:				
4a. F	Real estate taxes		4a. \$		0.00
	Property, homeowner's, or renter's insurance Home maintenance, repair, and upkeep expenses		4b. \$ 4c. \$		0.00

Debtor 1		Slava Shapiro		ber (if known)	
	4d.	Homeowner's association or condominium dues	4d.	\$	0.00
5.	Addit	ional mortgage payments for your residence, such as home equity loans	5.	\$	0.00

Debtor '	Slava Sh	apiro	Case num	Case number (if known)				
6. Uti	ilities:							
6a	. Electricity,	heat, natural gas	6a.	\$	500.00			
6b	. Water, sev	wer, garbage collection	6b.	\$	80.00			
6c.	. Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	250.00			
6d	. Other. Spe	ecify: Internet and Cable	6d.	\$	200.00			
7. Fo		ekeeping supplies	7.	\$	1,200.00			
		children's education costs	8.	\$	0.00			
		ry, and dry cleaning	9.	\$	280.00			
	O,	products and services	10.		0.00			
	•	ntal expenses	11.	·	0.00			
		Include gas, maintenance, bus or train fare.		Ψ	0.00			
	not include ca		12.	\$	250.00			
		clubs, recreation, newspapers, magazines, and books	13.	\$	50.00			
		ributions and religious donations	14.		0.00			
	surance.	induono ana rengious denations	1-7.	Ψ	0.00			
		surance deducted from your pay or included in lines 4 or 20.						
	a. Life insura	, , ,	15a.	\$	100.00			
	b. Health ins		15b.	·	35.00			
_	c. Vehicle ins		15c.	·	100.00			
		rance. Specify:	15d.	· -	0.00			
		clude taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00			
	ecify:	icide taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00			
		ease payments:		Ψ	0.00			
		ents for Vehicle 1	17a.	\$	0.00			
		ents for Vehicle 2	17b.	·	0.00			
		ecify: NYS Medicaid Settlement	176. 17c.	·	6,333.00			
		ecify: Child Support	17d.	·	3,500.00			
17			17u.	φ	,			
40 V-		of My Step Children	-1	Ф	3,000.00			
		of alimony, maintenance, and support that you did not report		\$	0.00			
		your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 10 s you make to support others who do not live with you.	, ioi).	\$	0.00			
	ecify:	s you make to support others who do not live with you.	19.	Ψ	0.00			
		erty expenses not included in lines 4 or 5 of this form or on S		our Incomo				
		s on other property	20a.		0.00			
	b. Real estat		20b.	·	0.00			
		homeowner's, or renter's insurance	200. 20c.	·				
				· <u> </u>	0.00			
		nce, repair, and upkeep expenses	20d.	·	0.00			
		er's association or condominium dues	20e.	·	0.00			
21. Ot l	her: Specify:		21.	+\$	0.00			
22 Ca	lculate vour i	monthly expenses						
	-	through 21.		\$	18,578.00			
		2 (monthly expenses for Debtor 2), if any, from Official Form 106	I-2	\$	10,070.00			
			J Z		40.550			
22	c. Add line 22	a and 22b. The result is your monthly expenses.		\$	18,578.00			
23. Ca	lculate vour	monthly net income.		l				
	-	12 (your combined monthly income) from Schedule I.	23a.	\$	12,573.84			
	23b. Copy your monthly expenses from line 22c above.			-\$	18,578.00			
20			200.	*	10,070.00			
23	c. Subtract v	our monthly expenses from your monthly income.						
_0		is your monthly net income.	23c.	\$	-6,004.16			
		- y						
		an increase or decrease in your expenses within the year after						
		ou expect to finish paying for your car loan within the year or do you expec	t your mortgage	payment to increa	se or decrease because of a			
_		terms of your mortgage?						
	No.							
	Yes.	Explain here:						

1/22/21 12:58PM

	rmation to identify your	case:			
Debtor 1	Slava Shapiro	ACT III AT			
D 1. 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
(Opodoo II, IIIIIIg)	T HOC TOLLING	mado rame	Zaotitamo		
United States B	sankruptcy Court for the:	EASTERN DISTRICT OF N	EW YORK		
Coso number					
Case number					☐ Check if this is an
,					amended filing
					<u> </u>
Official For	m 106Dec				
		on In all side of D	alataria Ca	ماريامم	
Declara	tion About a	an Individual D	eptor's Sc	neaules	12/15
If two married p	people are filing togethe	r, both are equally responsib	le for supplying corr	ect information.	
You must file th	nis form whenever you f	ile bankruptcy schedules or a	amended schedules	Making a false statemen	t concealing property or
		n connection with a bankrup			
	18 U.S.C. §§ 152, 1341, 1		•	• , , ,	
Sig	gn Below				
Did you p	ay or agree to pay some	one who is NOT an attorney	to help you fill out be	ankruptcy forms?	
■ No					
□ Yes.	Name of person			Attach Rankrunt	cy Petition Preparer's Notice,
☐ 1 <i>6</i> 5.	Marile of person				Signature (Official Form 119)
				2 ooiaration, ama	olginatare (Gineral Ferni Fre)
		that I have read the summary	y and schedules filed	I with this declaration an	d
that they a	re true and correct.				
X /s/ SIa	ava Shapiro		Х		
	Shapiro Shapiro		Signature of I	Debtor 2	
	ure of Debtor 1		3 9		

Official Form 106Dec

Date ____

Date **January 22, 2021**

		ation to identify your	case:			
Debtor	1	Slava Shapiro First Name	Middle Name	Last Name		
Debtor	2					
(Spouse	if, filing)	First Name	Middle Name	Last Name		
United	States Bank	cruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case n						Check if this is an amended filing
State		of Financial A		duals Filing for B	Bankruptcy equally responsible for sup	4/19
nforma	ation. If mo		attach a separate sheet to		y additional pages, write yo	
Part 1:	Give De	tails About Your Ma	rital Status and Where Yo	u Lived Before		
ı. Wi	nat is your	current marital statu	s?			
_						
	Married Not marri	ad				
_						
2. Du	iring the las	st 3 years, have you	lived anywhere other than	where you live now?		
	No					
	Yes. List	all of the places you li	ved in the last 3 years. Do r	not include where you live nov	٧.	
D	ebtor 1 Pric	or Address:	Dates Debtor 1	1 Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there
					nity property state or territor tico, Texas, Washington and V	
	No					
		e sure you fill out <i>Sch</i>	edule H: Your Codebtors (C	Official Form 106H).		
D 40	=					
Part 2	Explain	the Sources of You	r Income			
Fill	in the total	amount of income you	received from all jobs and	ing a business during this yeal all businesses, including part ve together, list it only once un		ndar years?
пу						
ır y □	No					
_		n the details.				
_		n the details.	Debtor 1		Debtor 2	
_		n the details.	Debtor 1 Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Debtor 2 Sources of income Check all that apply.	Gross income (before deductions and exclusions)
□ ■	Yes. Fill i	n the details. f current year until for bankruptcy:	Sources of income	(before deductions and	Sources of income	(before deductions

De	ebtor 1	Sla	ava Shapi	ro		Cas	Case number (if known)			
					Debtor 1		Debtor 2			
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)	
			dar year: December	31, 2020)	☐ Wages, commissions, bonuses, tips	\$292,024.00	☐ Wages, com bonuses, tips	missions,		
					Operating a business		Operating a	business		
			dar year be December		☐ Wages, commissions, bonuses, tips	\$480,000.00	☐ Wages, com bonuses, tips	missions,		
					Operating a business		☐ Operating a	business		
	and o	other ings. each s	public bene If you are fil	fit payments; ing a joint cas the gross inco	ner that income is taxable. Expensions; rental income; intege and you have income that ome from each source separa	rest; dividends; money colle you received together, list it	cted from lawsuits; only once under De	royalties; an ebtor 1.		
					Debtor 1		Debtor 2			
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)	
Pa	rt 3:	List	Certain Pa	yments You	Made Before You Filed for	Bankruptcy				
6.	Are o	eithe i No.	Neither D individual	ebtor 1 nor E primarily for a 90 days befo Go to line 7	's debts primarily consume bebtor 2 has primarily consu- personal, family, or househo are you filed for bankruptcy, d c.	umer debts. Consumer debold purpose." id you pay any creditor a total	al of \$6,825* or mor	re?		
				paid that cr not include	editor. Do not include paymer payments to an attorney for t t on 4/01/22 and every 3 year	nts for domestic support obli his bankruptcy case.	gations, such as ch	ild support a	and alimony. Also, do	
		Yes.			or both have primarily consumer you filed for bankruptcy, d		al of \$600 or more?			
			No.	Go to line 7						
			□ Yes	include pay	each creditor to whom you pa ments for domestic support o this bankruptcy case.					
	Cre	ditor'	s Name an	d Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this p	payment for	
						para	5 0110			

Deb	otor 1 Slava Shapiro		Cas	se number (if known)				
	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.							
	No☐ Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		yments or transfer a	any property on a	ccount of a de	ebt that benefited an		
	No☐ Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name		
Par	t 4: Identify Legal Actions, Repossession	ons, and Foreclosures						
	Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes.							
	□ No■ Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of th	e case		
	NYS Medicaid Fraud Control Unit, AG of the State of NY; in the Matter of Slava Shapiro and Slava Shapiro, D.D.S., M.D., P.C.	NYS Medicaid Settlement				□ Pending□ On appeal■ Concluded		
	спа р и с, 2121с., 1112., 1101				Settled			
	Within 1 year before you filed for bankrup Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	shed, attached	I, seized, or levied?		
	Creditor Name and Address	Describe the Property		Date		Value of the		
		Explain what happene	ed			property		
	Within 90 days before you filed for bankru accounts or refuse to make a payment be ■ No □ Yes. Fill in the details.		cluding a bank or fir	nancial institutior	ı, set off any a	mounts from your		
	Creditor Name and Address	Describe the action th	e creditor took	Date taker	action was	Amount		
	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or ■ No □ Yes		erty in the possess			fit of creditors, a		

Case 8-21-70126-reg Doc 1 Filed 01/22/21 Entered 01/22/21 13:04:28 1/22/21 12:58PM Debtor 1 Slava Shapiro Case number (if known) Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of payment Address transferred or transfer was **Email or website address** made Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Person's relationship to you

Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

1/22/21 12:58PM

Debtor 1 Slava Shapiro Case number (if known)

	beneficiary: (These are often called asset-prof	conorrad vides.)						
	No Yes. Fill in the details.							
	Name of trust Description and value of the property transferred					Date Transfer was made		
Pa	rt 8: List of Certain Financial Accounts, Ins	truments, Safe Deposi	it Boxes, and S	Storage Unit	ts			
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc	other financial accou	ınts; certificate	s of deposi				
	No Yes. Fill in the details.	iations, and other ima	nciai institutio					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 yeash, or other valuables?	ear before you filed fo	r bankruptcy, a	any safe de _l	posit box or other depos	sitory for securities,		
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Address (Number, Street, City,		the contents	Do you still have it?		
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
	No							
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	Address (Number, Street, City,			Do you still have it?		
Pa	rt 9: Identify Property You Hold or Control f	or Someone Else						
23.			lude any prope	rty you bor	rowed from, are storing	for, or hold in trust		
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)		(Number, Street, City, State and ZIP		the property	Value		
Pa	rt 10: Give Details About Environmental Info	rmation						
For	the purpose of Part 10, the following definition	ns apply:						
	Environmental law means any federal, state, toxic substances, wastes, or material into th regulations controlling the cleanup of these	e air, land, soil, surfac	e water, groun					
	Site means any location, facility, or property to own, operate, or utilize it, including dispose	-	environmental	law, wheth	er you now own, operate	e, or utilize it or used		
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance.							

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

hazardous material, pollutant, contaminant, or similar term.

Debtor 1 Slava Shapiro

Case number (if known)

24.	Has	any governmental unit notified you that	t you	may be liable or potentially liable	unc	der or in violation of an environme	ental law?					
		No Yes. Fill in the details.										
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice					
25.	Hav	e you notified any governmental unit of	any r	elease of hazardous material?								
	■ No □ Yes. Fill in the details.											
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice					
26.	Hav	re you been a party in any judicial or adn	minist	rative proceeding under any envi	ironr	mental law? Include settlements a	and orders.					
		No Yes. Fill in the details.										
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case					
Par	Part 11: Give Details About Your Business or Connections to Any Business											
27.	Wit	hin 4 years before you filed for bankrupt	tcy, d	id you own a business or have an	ıy of	the following connections to any	business?					
		☐ A sole proprietor or self-employed in	in a tr	ade, profession, or other activity,	eith	ner full-time or part-time						
		☐ A member of a limited liability comp	oany (LLC) or limited liability partnership	ip (L	LLP)						
		☐ A partner in a partnership										
		☐ An officer, director, or managing exc	ecuti	ve of a corporation								
		☐ An owner of at least 5% of the voting	g or e	equity securities of a corporation								
		No. None of the above applies. Go to F	Part 1	2.								
		Yes. Check all that apply above and fill	s. Check all that apply above and fill in the details below for each business.									
	Ad	siness Name dress mber, Street, City, State and ZIP Code)		Describe the nature of the business Name of accountant or bookkeeper		Employer Identification number Do not include Social Security number or ITIN.						
	(IVU	iniber, Street, Gity, State and Zir Gode)	Nan			Dates business existed						
		ava Shapiro, D.D.S., M.D., P.C.	Der	ntal Office		EIN: 26-2645443						
		167 Froehlich Farm Blvd Woodbury, NY 11797-1000		n T. Flanagan CPA PC, Hammond Rd, at Northport, NY 11731	Rd, 30,		3 - To January					
			256	Rozenberg & Associates 5 E. 17th Street oklyn, NY 11235								
28.		hin 2 years before you filed for bankrupt itutions, creditors, or other parties.	tcy, d	id you give a financial statement t	to ar	nyone about your business? Inclu	de all financial					
		No Yes. Fill in the details below.										
		me dress mber, Street, City, State and ZIP Code)	Date	e Issued								

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				1/22/21 12.50PW
Debtor 1	Slava Shapiro		Case number (if known)	
Part 12: 5	sign Below			
are true and with a bank	I correct. I understand that ma		ents, and I declare under penalty of perjury to operty, or obtaining money or property by fra up to 20 years, or both.	
/s/ Slava S	Shapiro			
Slava Sha Signature	•	Signature of Debtor 2	2	
Date Jan	uary 22, 2021	Date		
Did you atta ■ No □ Yes	nch additional pages to Your S	Statement of Financial Affairs for Indiv	riduals Filing for Bankruptcy (Official Form 10	07)?
Did you pay	or agree to pay someone wh	o is not an attorney to help you fill ou	t bankruptcy forms?	
No				

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inform	mation to identify your case:			
Debtor 1	Slava Shapiro			
Debtor 2	First Name M	iddle Name L	ast Name	
(Spouse if, filing)	First Name M	iddle Name L	ast Name	
United States Ba	ankruptcy Court for the: EAST	ERN DISTRICT OF NEW YO	ORK	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	orm 108			
Statemer	nt of Intention fo	r Individuals F	iling Under Chapte	er 7
f you are an ind	ividual filing under chapter 7, y	ou must fill out this form i	f.	
	e claims secured by your prope			
_		· ·		
	sed personal property and the I		ankruptcy petition or by the date se	t for the meeting of creditors
			e. You must also send copies to the	
on the				
If two married no	oonlo aro filing together in a ici	nt caso, both are equally r	asponsible for supplying correct in	formation Both dobtors must
	nd date the form.	in case, both are equally in	esponsible for supplying correct in	iormation. Both debtors must
	and accurate as possible. If mo our name and case number (if		n a separate sheet to this form. On	the top of any additional pages,
write y	our name and case number (ii	Miowij.		
Part 1: List Yo	our Creditors Who Have Secure	ed Claims		
1 For any credit	ors that you listed in Part 1 of 9	Schedule D: Creditors Who	o Have Claims Secured by Property	(Official Form 106D), fill in the
information be	elow.		o nave claims decared by 1 reperty	(Omolar i omi 1005), ili ili ili
Identify the cr	editor and the property that is co		intend to do with the property that	Did you claim the property
		secures a de	bt?	as exempt on Schedule C?
Creditor's		☐ Surrender	the property	□ No
name:			e property and redeem it.	□ NO
			property and redeem it.	☐ Yes
Description of			tion Agreement.	
property			property and [explain]:	
securing debt:	:			_
Creditor's		☐ Surrender		□ No
name:			e property and redeem it.	□Yes
Description of			property and enter into a	☐ Yes
property			tion Agreement. property and [explain]:	
securing debt:	:	□ Retain the	property and [explain].	
				_
Creditor's		☐ Surrender		_ □ No
Creditor's name:		☐ Retain the	the property. e property and redeem it. property and enter into a	No □ Yes

Official Form 108

Creditor's

property

securing debt:

Statement of Intention for Individuals Filing Under Chapter 7

☐ Surrender the property.

☐ Retain the property and [explain]:

☐ No

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Debt	or 1 _ S	Slava Sha	apiro	Case nui	mber (if known)
na	me:			Retain the property and redeem it.	
De	escriptio	on of		☐ Retain the property and enter into a Reaffirmation Agreement.	a .
	operty	0.		Retain the property and [explain]:	
•	curing c	debt:		— Notalli the property and [explain].	
			nexpired Personal Property L		
n the	inform	nation belo	ow. Do not list real estate leas		nd Unexpired Leases (Official Form 106G), fill in effect; the lease period has not yet ended. C. § 365(p)(2).
Desc	ribe yo	our unexpi	red personal property leases		Will the lease be assumed?
Less	or's nan	ne:	Aleksandr Berezovskiy		□ No
					■ Yes
Desc Prop	•	of leased	Apartment Lease at 3350 May 2022	Shore Parkway, Brooklyn, NY 11235 ex	pires in
Part :	3: S i	gn Below			
			rry, I declare that I have indica at to an unexpired lease.	ated my intention about any property of my e	state that secures a debt and any personal
X	/s/ Sla	va Shapi	ro	x	
		Shapiro ure of Debt	or 1	Signature of Debtor 2	
	Date	Janua	ry 22, 2021	Date	

Fill in this information to identify your case:						rected in	this form and in I	Form
Debtor 1 Slava Shapiro			12	2A-1S	nbb:			
Debtor 2 (Spouse, if filing)				■ 1. T	here is no pres	umption o	of abuse	
United States Bankruptcy Court for the: Eastern District of	New York	k			applies will be m	ade und	ine if a presumption of the control	
Case number(if known)				□ 3. T		does not	apply now becaubut it could apply	
					eck if this is a		117	141011
Official Form 122A - 1				_ 0	ook ii tiilo lo u	- amon	aca ming	
Chapter 7 Statement of Your Cur	rent	Mor	nthly Inc	com	е			12/1
Be as complete and accurate as possible. If two married people a attach a separate sheet to this form. Include the line number to we case number (if known). If you believe that you are exempted from qualifying military service, complete and file Statement of Exempart 1: Calculate Your Current Monthly Income	hich the a	addition mption	nal information of abuse becar	applies use you	On the top of ar	y additionarily con	nal pages, write yo sumer debts or be	our name and cause of
What is your marital and filing status? Check one on	nly.							
☐ Not married. Fill out Column A, lines 2-11.	•							
☐ Married and your spouse is filing with you. Fill ou	ıt both Co	olumns	A and B, lines	2-11.				
■ Married and your spouse is NOT filing with you.	You and	your s	pouse are:					
Living in the same household and are not lega	ılly separ	rated. F	Fill out both Co	olumns	A and B, lines 2	:-11.		
☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are left living apart for reasons that do not include evading	egally sep	parated	l under nonba	nkrupto	y law that applie	s or that		
Fill in the average monthly income that you received from all 101(10A). For example, if you are filing on September 15, the 6-m the 6 months, add the income for all 6 months and divide the total spouses own the same rental property, put the income from that p	onth period by 6. Fill ir	d would n the res	be March 1 thro sult. Do not inclu	ough Aug de any i	gust 31. If the amo	unt of you ore than o	r monthly income vance. For example, if	aried during both
				Colur		Columi Debtor non-fil		
Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and com	missic	ons (before all	\$	4,985.40	\$	0.00	
Alimony and maintenance payments. Do not include Column B is filled in.	payment	s from	a spouse if	\$	0.00	\$	0.00	
4. All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	. Include r d, your de	regular pender	contributions nts, parents,	\$	0.00	\$	0.00	
5. Net income from operating a business, profession,	or farm					<u></u>		
	C	Deb 0.00	tor 1					
Gross receipts (before all deductions)	· —	0.00						
Ordinary and necessary operating expenses Net monthly income from a business, profession, or fare	· —		Copy here ->	\$	0.00	\$	0.00	
6. Net income from rental and other real property	ΠΨ		.,	· —		· ——		
		Deb	tor 1					
Gross receipts (before all deductions)	· -	0.00						
Ordinary and necessary operating expenses	·	0.00	_					
Net monthly income from rental or other real property	\$	0.00	Copy here ->	· —	0.00	\$	0.00	
7. Interest, dividends, and royalties				\$	0.00	\$	0.00	

7. Interest, dividends, and royalties

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Debtor 1 Slav	a Shapiro			Case number	(if known)			
				Column A Debtor 1		Column B Debtor 2 or non-filing s		
8. Unemploy	ment compensation			\$	0.00	\$	0.00	
	er the amount if you contend that the amou Security Act. Instead, list it here:	nt received was a bene	fit under					
			.00					
For you	r spouse	.\$0	.00					
benefit und	r retirement income. Do not include any a der the Social Security Act.			\$	0.00	\$	0.00	
Do not incl received a	om all other sources not listed above. Spude any benefits received under the Social is a victim of a war crime, a crime against hierrorism. If necessary, list other sources on to	Security Act or payment umanity, or international	nts I or					
·				\$	0.00	\$	0.00	
_				\$	0.00	\$	0.00	
To	otal amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
	your total current monthly income. Add I nn. Then add the total for Column A to the t		\$	4,985.40	+	0.00		4,985.40
Part 2: Det	ermine Whether the Means Test Applies	to You					income	
12. Calculate	your current monthly income for the year	r. Follow these steps:						
12a. Copy	your total current monthly income from line	11		Сору	/ line 11 h	ere=>	\$	4,985.40
Multip	oly by 12 (the number of months in a year)						x 1	2
12b. The r	esult is your annual income for this part of t	he form				12b.	\$5	9,824.80
13. Calculate	the median family income that applies to	you. Follow these ste	ps:					
Fill in the s	state in which you live.	NY						
	number of people in your household.	7						
To find a li	nedian family income for your state and sizon st of applicable median income amounts, g m. This list may also be available at the bar	o online using the link s		in the separa		13. tions	\$12	9,384.00
14. How do th	e lines compare?							
14a. ■	Line 12b is less than or equal to line 13. Go to Part 3.	On the top of page 1, cl	neck box	1, There is r	no presum	ption of abuse	e.	
14b. 🗖	Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	t, The pre	esumption of	abuse is o	determined by	Form 12	2A-2.
Part 3: Sig	n Below							
By sig	gning here, I declare under penalty of perjui	ry that the information of	n this sta	atement and	in any atta	chments is tru	ue and co	rrect.
χ /s/	Slava Shapiro							
	ava Shapiro Inature of Debtor 1							
	nuary 22, 2021 // DD / YYYY							
If you	checked line 14a, do NOT fill out or file Fo	rm 122A-2.						
If you	checked line 14b, fill out Form 122A-2 and	file it with this form.						

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B2030 (Form 2030) (12/15)

United States Renkruntey Court

		United States Ba Eastern Distric			
In re	e Slava Shapiro			Case No.	
	-	De	ebtor(s) C	Chapter 7	
	DISCLO	OSURE OF COMPENSATION	OF ATTORNEY FO	OR DEBTOR(S)	
1.	compensation paid to me v	29(a) and Fed. Bankr. P. 2016(b), I certify the vithin one year before the filing of the petition deduction of or in connection of the petition of the connection of the conne	on in bankruptcy, or agreed to	o be paid to me, for services rendered	d or to
	For legal services, I h	ave agreed to accept	\$	500.00	
		his statement I have received		500.00	
	Balance Due		\$	0.00	
2.	The source of the compens	sation paid to me was:			
	■ Debtor □	Other (specify):			
3.	The source of compensation	on to be paid to me is:			
	■ Debtor □	Other (specify):			
4.	■ I have not agreed to sh	nare the above-disclosed compensation with	any other person unless they	are members and associates of my la	aw firm.
		the above-disclosed compensation with a per, together with a list of the names of the peo			m. A
5.	In return for the above-dis	closed fee, I have agreed to render legal serv	vice for all aspects of the bank	akruptcy case, including:	
	 b. Preparation and filing of c. Representation of the d d. [Other provisions as ne Negotiations we reaffirmation a 	s financial situation, and rendering advice to of any petition, schedules, statement of affair lebtor at the meeting of creditors and confirm seeded] with secured creditors to reduce to magreements and applications as needed avoidance of liens on household good	rs and plan which may be req mation hearing, and any adjou arket value; exemption pl ed; preparation and filing	quired; urned hearings thereof; lanning; preparation and filing	of
6.	Representation	otor(s), the above-disclosed fee does not incle n of the debtors in any dischargeabilitersary proceeding.	ude the following service: ty actions, judicial lien av	voidances, relief from stay action	ons or
		CERTIFIC	CATION		
this	I certify that the foregoing bankruptcy proceeding.	is a complete statement of any agreement of	r arrangement for payment to	o me for representation of the debtor((s) in
	January 22, 2021	Isl	Sergei Orel		
_	Date	Se Sig Se 21:	rgei Orel mature of Attorney rgei Orel LLC 25 Center Avenue lite 310		
		Fo 20 se	rt Lee, NJ 07024 14911464 Fax: 20160467 rgeiorel@yahoo.com	775	

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United States Bankruptcy Court Eastern District of New York

In re	Slava Shapiro	Case No.		
		Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

USBC-44 Rev. 9/17/98

Aleksandr Berezovskiy 3350 Shore Parkway Brooklyn, NY 11235

BHG-Bankers Healthcare Gp 201 Solar Street Syracuse, NY 13204

BMW Financial Services 300 Chestnut Ridge Rd Woodcliff Lake, NJ 07677

Citi Business Credit Line P.O. Box 9001037 Louisville, KY 40290

CityMD Urgent Care 1345 6th Ave New York, NY 10105

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101

Irada Shapiro 118 Greenway Drive South Syosset, NY 11791

MOHELA/Dept of Education 633 Sprirt Drive Chesterfield, MO 63005

Navient Department Educat PO Box 9635 Wilkes Barre, PA 18773

NYS Medicaid Settlement Medicaid Fraud Control Un 300 Motor Parkway Hauppauge, NY 11788

Optimum Cable 1 Court Square West Long Island City, NY 11101 Sprint 6391 Sprint Parkway Overland Park, KS 66251

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UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL **BANKRUPTCY RULE 1073-2(b)**

DEBTOR(S):	Slava Shapiro	CASE NO.:.
		-2(b), the debtor (or any other petitioner) hereby makes the following disclosure knowledge, information and belief:
was pending at any spouses or ex-spous partnership and one have, or within 180	time within eight years before ses; (iii) are affiliates, as define or more of its general partners	or purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are ted in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a s; (vi) are partnerships which share one or more common general partners; or (vii) f either of the Related Cases had, an interest in property that was or is included in the a).]
□ NO RELATED	CASE IS PENDING OR HAS	BEEN PENDING AT ANY TIME.
■ THE FOLLOW	ING RELATED CASE(S) IS F	PENDING OR HAS BEEN PENDING:
1. CASE NO.: 8-2 District of New York		pert E. Grossman DISTRICT/DIVISION: US Bankruptcy Court - Eastern
DEBTOR NAME:	Slava Shapiro, D.D.S., M.D.,	P.C.
CASE STILL PENI	DING (Y/N): Y	[If closed] Date of closing:
CURRENT STAT	US OF RELATED CASE:	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED	(Refer to NOTE above):Debtor's former business
	LISTED IN DEBTOR'S SCHOF RELATED CASE:	IEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRIC	CT/DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:
CURRENT STAT	US OF RELATED CASE:	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED	(Refer to NOTE above):
	LISTED IN DEBTOR'S SCH OF RELATED CASE:	IEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRIC	CT/DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:

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DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	
(Dischar	ged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE	E above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" (" SCHEDULE "A" OF RELATED CASE:	REAL PROPERTY") WHICH WAS ALSO LISTED IN
NOTE: Pursuant to 11 U.S.C. § 109(g), certain individuals who have eligible to be debtors. Such an individual will be required to fi	ave had prior cases dismissed within the preceding 180 days may not ile a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNI	EY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New York (Y/	N): Y
CERTIFICATION (to be signed by pro se debtor/petitioner or del	
I certify under penalty of perjury that the within bankruptcy case as indicated elsewhere on this form.	is not related to any case now pending or pending at any time, except
/s/ Sergei Orel	
Sergei Orel Signature of Debtor's Attorney Sergei Orel LLC 2125 Center Avenue	Signature of Pro Se Debtor/Petitioner
Suite 310 Fort Lee, NJ 07024 2014911464 Fax:2016046775	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

NOTE: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

Rev.8/11/2009 USBC-17